Optimism in Children Exposed to Child Maltreatment

BY

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Abstract

Factors that predict optimism, the belief that positive things will happen in one's life, in youth who have experienced maltreatment were examined; specifically, positive family characteristics, life events, and social support resources were tested, all of which have been implicated in the research literature as potential predictors of optimism in youth. Measures of optimism, social support, and life events were completed by 46 youth in foster care, and their caregivers completed a measure of the family environment. Results showed that of the three hypothesized predictors of youth optimism, only life events significantly affected youths' levels of optimism. Results are somewhat consistent with general perspectives on how optimism develops, but point to the need to continue to study how optimism operates in children who have been exposed to maltreatment. Implications of these results for interventions and improvements to the foster care system are discussed.

Optimism in Children Exposed to Child Maltreatment

Optimism, or one's belief that good things will happen, is associated with positive outcomes for individuals exposed to a wide variety of stressors (Carver & Scheier, 2002; Scheier & Carver, 1993). From chronic illness to exposure to divorce and trauma, the research shows that people who display positive expectations for their future tend to show greater adjustment and more adaptive behavior than those who endorse a negative view of life events (i.e., Brodhagen & Wise, 2008; Mazur, Wolchik, & Sandler, 1992; Pence, Valrie, Gil, Redding-Lallinger, & Daeschner, 2007).

Although research most often frames optimism as a predictor for subsequent positive adjustment, the abundance of research thus far is compelling enough to suggest that the field should also form empirical questions to test how optimism in youth develops (i.e., what predicts optimism). Indeed, multiple authors have drawn attention to the dearth of information on optimism's origins and have issued a call for research on the development of optimism (Chang, 2001; Gillham, Shatté, Reivich, & Seligman, 2001). Theoretical perspectives in the field suggest that characteristics of the child's family (i.e., relationship with parents, modeling a positive or negative worldview, and criticism), prior experiences, and access to resources (i.e., social support outside of the family) are germane to the development of optimism in youth exposed to a range of life events (Scheier & Carver, 1993; Seligman, Reivich, Jaycox, & Gillham, 1995; Gillham, Reivich, & Shatté, 2001). To date, however, no research has systematically tested these implicated factors. Even if family influences, life events, and resources were supported as mechanisms for optimism expression in children, explanations for optimism in situations where the availability of these potentially key constructs is compromised is still not fully explicated, because not all developmental processes are the same for all populations. For example, for

children whose life events involve a disruption of the family structure and/or a negativistic or hostile emotional climate in the home, such as children exposed to child maltreatment, the predictive role of familial influences in the expression of optimism might be less clear. Moreover, because exposure to maltreatment is related to the development of a negative internal model of the world and other people as hurtful and unsafe (Keil & Price, 2009), children exposed to maltreatment may be at particular risk for developing deficits in optimism. In fact, children exposed to child maltreatment evidence higher rates of depression, and are consequently more likely to exhibit maladaptive ways of looking at the events in their lives (Kaufman, 1991). Given that optimism is related to positive outcomes, examining how various factors can facilitate optimism for children exposed to maltreatment may help create a better understanding of how to alter the negative psychological trajectory for this vulnerable population of youth.

Clearly there is a need to further understand the antecedents of optimism, and while studying the expression of optimism in a normative sample of children may also be a fruitful endeavor, studying optimism within a vulnerable population, such as children exposed to maltreatment, may prove beneficial. This population may be especially vulnerable as abuse history is ranked as one of the most influential events on adult mental illness, and is often more predictive of symptomatology than other traumatic experiences (O'Hare & Sherrer, 2009). The literature consistently shows that children who have been maltreated are at high risk for a host of negative outcomes (i.e., psychological disorders, problems with peers) as a result of their abuse history (Cicchetti & Toth, 2005). Despite this risk for negative development, evidence does suggest that optimism may protect children who have been maltreated from these negative outcomes. For example, Henry (2001) found in post-maltreatment interviews with resilient adolescents (i.e., attending school and/or employed and participating successfully in an

independent living program) that one of the key themes these youth expressed as part of their ability to achieve positive outcomes was having positive, optimistic expectations for their future life and capabilities.

Furthermore, it is important to discern the factors that influence optimism in this population as such information may guide therapeutic inventions and child protection policies that are structured to improve the lives of children who have been maltreated. For example, therapy and long-term outcomes for children who have experienced maltreatment may be more successful if foster parent trainings emphasize building family environments that support optimism. Therefore, the present study will test the factors related to the expression of optimism in children exposed to maltreatment to assist the field by providing a greater understanding of important possible precursors to optimism and positive adjustment.

Optimism Defined

Optimism is typically described within the literature as a generalized belief that positive events will occur in one's life (Carver & Scheier, 2002); however, included in this construct may also be the expectation that events will be resolved positively or their occurrence can be explained in a positive way (i.e., negative events are viewed as results of temporary, specific and external causes (Gillham et al., 2001b)). As a construct in research, optimism, although popular, can be problematic for several reasons. First, as Gillham et al. (2001b) noted, the term is often used colloquially, which may make the scientific study of optimism confusing, especially if clear definitions of the construct are not provided. Second, research studies tend to conceptualize optimism in different ways (Chang, 2001), making comparisons of results across studies difficult. For example, some researchers define optimism as situational, such as an individual's way of explaining the causes of a specific event (Peterson & Steen, 2002). In contrast, other

researchers define optimism as a stable trait of *expectation* for positive events that exists across multiple situations and domains (Scheier & Carver, 1993). It is this latter definition that has the most research support, perhaps because children are not always able to identify or differentiate the causes of the specific events they experience (Jackson, Frick, & Dravage-Bush, 2000). Therefore, for the present study, optimism will be conceptualized as one's general expectation for positive events to happen in the future.

Aside from competing operationalizations of the construct, what is also yet to be clarified is what factors can promote the expression of optimism, especially in populations where optimism would not be expected, such as children exposed to maltreatment. Because teaching optimism to children (by using cognitive reframing and conducting skill-building practice using stories and role plays) has been supported by the literature for improving their use of effective coping strategies and decreasing depressive thinking (Cunningham, Brandon, & Frydenberg, 2002), it is in children's best interest for the field to understand what factors influence emergent optimism so youth might draw on optimism for lifelong coping. The present study seeks to add to the current literature by determining key variables and their interactions that predict the expression of optimism.

Precursors of Optimism

Family influences.

Familial modeling of optimism.

According to social learning theory, children learn how to act and think based on the behavior and beliefs of their primary caretakers. So it is with optimism, as Peterson and Seligman (2004) suggested that, in addition to environmental and genetic influences, children may adopt a level of optimism consistent with that modeled by their caretakers through social

learning processes. Seligman (1991) posited that listening to a pessimistic caregiver can negatively influence a child's positive expectations for future events and contribute to a worldview that is decidedly negative, such that negative life events are seen as permanent, pervasive, and internally-caused; in contrast, he suggested (and even strongly recommended to parents) that seeing adults demonstrate optimism is a key mechanism for children to develop positive expectations for the future. For children exposed to maltreatment, however, it is unlikely that their early family experiences include demonstrations of optimism and positivity. Instead, children who have been exposed to maltreatment perceive more conflict and less cohesion in their family environment (i.e., more criticism and negativity combined with less support) than children from non-maltreating families (Meyerson, Long, Miranda, & Marx, 2002), all of which are characteristics at odds with positive expectations and attitudes for the future.

Empirical support for Seligman's perspective is minimal and mixed. Seligman et al. (1995) found significant positive relations between mothers' and children's levels of optimism. Garber and Flynn (2001), however, found that mothers and children did not have significantly correlated positively- or negatively-valenced views on events in general, but they did agree on explanations for specific events in the child's history. The authors suggested that this finding illustrates that children do not merely copy their parents' worldviews, but they do incorporate these modeled explanations in their understanding of events for some events (particularly ones that are more salient to the child) and not others. Furthermore, Hasan and Power (2002) found that there was no correlation between parental and child self-reports of optimism in their community sample.

These results further highlight that optimism is likely not merely copied from parents. The relation is not clear, however, and although not addressing optimism specifically, research

on depression in youth, a proxy for low levels of optimism, suggests that family factors are important in how youth view their future. For example, Yu and Seligman (2002) found that family environment (particularly conflict and cohesion) is associated with children's depressive symptoms. Those youth whose family was characterized by less conflict and more cohesion were also more likely to endorse a less pessimistic view. In general, family factors such as high levels of cohesion (togetherness and support for one another) and low levels of conflict (disagreement and conflict between family members) are predictive of positive outcomes for children (Omre & Buehler, 2001; Prevatt, 2003). Such family environments that are supportive and non-conflictual may be conducive to developing optimism as well. Although the lack of pessimism is not the same thing as the presence of optimism, the results thus far provide some support to the possible role of family characteristics in how children develop (or fail to develop) a positive view of their future.

Parenting characteristics and optimism.

Parenting characteristics may be another specific familial influence on children's optimism. Parents who are controlling and permit little autonomy have children who express lower levels of optimism than those with parents who are less controlling and grant more autonomy (Hasan & Powers, 2002). Evidence suggests that in maltreating families, children are likely exposed to parenting styles that include excessively high levels of control (Moos & Moos, 1994); such parenting behaviors may also contribute to a diminished potential for optimism for children exposed to maltreatment.

Moreover, Mezulius, Hyde, and Abramson (2006) found, through both self-report measures and behavioral observations, that negative parenting, including expressing anger, modeling attribution of negative causes for negative events, and showing negative affect toward

the child, was associated with more negative ways of thinking in children (i.e., anticipating negative outcomes for events, maintaining negative views of themselves, and making maladaptive attributions about causes of events). Additionally, Rose, Abramson, Hodulik, Halberstadt, and Leff (1994) found that early negative parent-child relationships (including maltreatment) can predict negative thinking in adults. It is likely that children who are victims of maltreatment have experienced both negative parenting and the modeling of negative expectations for the future. For example, a recent meta-analysis illustrated negative parenting in maltreating families across 33 studies, such that maltreating parents generally exhibited greater aversive behavior and negative affect toward their children, and lower positive behaviors, such as support and approval, than non-maltreating families (Wilson, Rack, Shi, & Norris, 2008). Taken together, these studies illustrate the importance of examining the influence of familial factors on optimism in children, because parenting and adult modeling of cognitions about their lives appears to play a role in how children develop ways of thinking about their own lives (Gamble & Roberts, 2005; Mezulius et al., 2006). Clearly, most of these studies show that caregivers may model ways to view one's future (particularly pessimism), and that the feedback and general attitudes caregivers express toward children may also be associated with children's worldviews.

Although most of the available research evidence supports the notion that negative parenting characteristics and hostile family environments may predispose children to a failure to develop optimism, theoretical perspectives suggest that the counter may also be true; that is, if parents provide models of good coping and optimism themselves, children will similarly develop positive future expectations as well (see Seligman et al., 1995). To date, there is little work directly testing the notion that positive interactions and modeling from parents affects children's

expectations. One exception is Cowen, Wyman, Work, Kim, Fagen, and Magnus (1997) who found that urban children whose parents held higher levels of positive expectations for their children's futures were more likely to fall into the "stress resistant" group of their sample, suggesting that positive parent-child relationships and parent optimism are implicated in child adaptation. Furthermore, Hasan and Powers (2002) found that while maternal optimism was not directly related to child expectations, it was related to parents' degree of autonomy granting, which was also related to child expectations. This suggests that parents might not only model optimism, but their optimism may indirectly affect children's optimism by means of their parenting and the dynamic familial process that occurs in interactions among family members. Clearly, results are mixed in the prediction of optimism in children from key family characteristics, such as parenting, modeling, and various family environment factors; therefore, the present study will attempt to discern how the family environment plays a role in child optimism.

Regardless of whether children who have been exposed to maltreatment experienced sub-optimal parenting that can be detrimental to building optimism or positive modeling and parenting from other caretaking adults that facilitates optimism, these children must also learn to manage the stress of their maltreatment and other life events that may hinder optimism development. In addition to the family environment, other factors are implicated in how children develop optimism. For example, exposure to stressful events during childhood may influence how children will understand future events (Seligman, 1991).

Stress and life events.

As Seligman postulates, when life events are resolved in a way that does not harm a child's well-being, the child may develop positive expectations for the future because the child

may learn that stressful experiences are temporary and manageable. Additionally, if a child's experience of life events is limited in frequency and intensity, the child may be more inclined to perceive his or her experience with future stressful events in an optimistic manner. However, if life events persist (as may often be the case when experiencing economic disadvantage, family discord, deaths, or illnesses), it is less likely that children will develop an optimistic view of the future, such that they may expect that their future circumstances will also be consistently negative or chronically stressful.

Experiencing maltreatment in childhood has both short-term and long-term stressor components. While actual abuse may be a short, time-limited incident, abuse may reoccur, therefore lengthening the time abuse is experienced (Bae, Solomon, & Gelles, 2009; Finkelhor, Omrod, & Turner, 2007). Additionally, child maltreatment may bring with it proximal and distal consequences, such as removal from the home (for short periods of time) or possible foster care placement (27.2 months on average) (U.S. Department of Health and Human Services, 2008). An abuse event may occupy very little actual time in a child's total life experience, but the effects of intrusion by social welfare agencies and the psychological correlates of abuse are potentially quite long-lasting. Because children like those with a history of maltreatment can and do experience continuous and interminable stressful life events, they may be at risk for developing a frame of reference for interpreting other non-maltreatment-related events as negative, which may reduce their optimism.

Beyond just experiencing the stress associated with maltreatment, the effects of other more typical stressful life events (i.e., divorce, parent losing a job, birth of new sibling, change of school, etc.), may also play a role in optimism in children who have been exposed to abuse. Indeed, experiencing maltreatment does not stop children from experiencing numerous other life

stressors (Jackson, Beasley, Kim, & Beals, 2010). In fact, studying the effects of non-maltreatment-related life events with this population may be especially important, because children exposed to maltreatment may live in more chaotic and stressful situations than children without a history of maltreatment (Yates, Dodds, Sroufe, & Egeland, 2003).

For the present study children's life events outside of maltreatment will be considered as possible influences on their expression of optimism. Because all of the youth in the present study have a confirmed history of maltreatment, it will be possible to also determine if other non-maltreatment-related events exert independent effects on optimism in this vulnerable population and also if life events produce combined predictive effects with family influences and resources on endorsement of optimism. In this way, it may be possible to determine if youth who may be predisposed to view events negatively actually do and if interactions between family characteristics, continued stress events, and resources influence the expression of optimism.

Despite having experiences that might lead to negative expectations for the future, children who have been exposed to maltreatment may have access to some resources as well that may help them maintain a positive outlook on their future lives. One such resource is social support.

Social support as a resource.

Research suggests that for children exposed to maltreatment and who reside in foster care, perceptions of high levels of social support are related to positive outcomes such as higher rates of employment, school participation, delayed age of parenthood, and an ability to maintain a home, as well as decreased rates of drug use and criminal activity (Daining & DePanfilis, 2007). Drawing on the support of significant others clearly can be an effective means of long-

term coping with stressful events and decreasing psychological distress for children who have been exposed to maltreatment.

Evidence further shows that social support and optimism are often significantly and positively related (Cannella, 2006; Dougall, Hyman, Hayward, McFeeley, & Baum, 2001; Shelby, Crespin, Wells-Di Gregorio, Lamdan, Siegel, & Taylor, 2008), suggesting that access to supportive people in one's life may influence one's positive expectations for the future.

Being placed in foster care, however, may result in a separation from established support networks. On the other hand, removal from an abusive environment and placement in a supportive foster home may result in new social support resources as well. If children in foster care are able to perceive a sense of positive support from others despite drastic life changes post-maltreatment, they may also be able to maintain a positive view for their future. Social support is clearly indicated as a potential link to positive outcomes for typical kids exposed to life events (Jackson, Kim, & Delap, 2007). What is less clear is how this construct operates for youth whose social support may be compromised or changed for the better by placement in foster care. The present study, therefore, will add to the literature by testing not only how family characteristics and non-maltreatment-related life events relate to optimism expression, but also determine the role of social support in optimism for youth exposed to maltreatment.

Limits of past research.

To date, little research emphasis has been placed on the development and expression of optimism in children, despite calls for more intensive research focus on this area. Most of the literature is theoretical in nature and fails to follow up with empirical tests. When tests are provided, much of the research has addressed solely the relation between positive future expectations and beneficial outcomes. Furthermore, the field has performed little examination of

optimism in at-risk populations (with an exception being individuals with health concerns), such as children exposed to maltreatment, who would likely benefit greatly from positive expectations for the future. Available research suggests that optimism may be an especially helpful tool for adaptation and coping for youth exposed to maltreatment (Brodhagen & Wise, 2008; Henry, 2001). Understanding the factors that predict optimism in these children is the first step in using positive expectations as a systems-wide tool for youths' success.

Additionally, there is little research on what family factors in a foster family environment can ameliorate for previous maltreatment experience (Orme & Buehler, 2001). Understanding what factors promote adaptive outcomes such as optimism in children exposed to maltreatment may have policy implications for the child welfare system.

Justification for the present study and hypotheses.

Given the theoretical perspectives within the current literature, support thus far suggests that family influences, exposure to stressful life events, and social support resources are likely components in the expression of optimism in youth exposed to trauma. Therefore, the present study sought to support these perspectives empirically by analyzing the ways family characteristics, stressful life events, and social support resources function to support the expression of optimism in a sample of children who have been exposed to maltreatment. It was predicted that positive family characteristics, life events and social support would each individually predict optimism endorsed by youth in foster care. Specifically, children who reported higher levels of positive family characteristics (high levels of cohesion and emotion expression and low levels of conflict) and social support and a lower number of life events would endorse greater optimism than children who report lower levels of positive family characteristics

and social support and higher levels of life events. In a more exploratory set of analyses, it was also expected that interactions between these factors would also predict optimism.

Methods

Participants

Participants were 46 foster youth and their caregivers who were also participants in another study on youth in foster care. Child participants were between the ages of 8-16 (*M* = 11.63 years, median = 11.50 years) (see Table 1).

Table 1

Demographic Information of Sample

Characteristic	Percentage of Sample	Mean	Median	Range
Age (in years)		11.63	11.50	8-16
Gender				
Male	52.2			
Female	47.8			
Ethnic Background				
Caucasian	45.7			
African-American	39.1			
Hispanic	6.5			
Bi- or Multi-ethnic	8.7			
Foster Family Income				
< $20,000/year	9.3			
$20,000-$49,000/year	32.5			
$50,000-$99,999/year	43.4			
$100,000 or more/year	8.7			

Power analyses were conducted for this sample size using the G*Power 3.1.0 program (Faul, Erdfelder, Buchner, & Lang, 2009; Faul, Erdfelder, Lang, & Buchner, 2007) to determine the recommended sample size for the present project, as well as to examine the actual power to detect significant effects for the present sample. A priori calculations suggest that to detect a large effect size (f^2 = .35) with three predictor variables, an alpha level of .05, and an estimated power of .95, a sample size of 54 is required. To detect a medium effect size (f^2 = .15) with the same parameters, a sample size of 119 is required. To detect a small effect size (f^2 = .02) with the same parameters, a sample size of 863 is required. Post hoc power analysis using the actual sample size (N = 46) shows that with three predictors and an alpha level of .05, a large effect size can be detected at an acceptable power level (.91), while power to detect a medium or small effect size is considerably lower (power = .54, .10, respectively).

Therefore, initial analyses showed that the present sample was sufficiently powered to detect large effect sizes for family characteristics, social support and life events' predictive effects, but might have been less able to detect small or medium effect sizes. However, in a recent meta-analysis, Oosterman, Schuengel, Slot, Bullens, and Doerleijers (2007) found large and moderate effects in several other studies examining foster care placement and child adjustment variables with similarly sized samples (Ns = 19, 51, and 64) of children in foster care. Furthermore, Orme and Buehler (2001) stated that there are few effect sizes reported for family and parenting variables in foster families, but that in typical families, these variables generally result in large and medium effect sizes.

Participants lived in and around a metropolitan area in the Midwest. Efforts were made to represent the ethnic diversity of the national population of foster youth. Percentages reported in the most recent statistics on demographic characteristics of children in foster care show

nationally 40% of children in care are Caucasian, 31% are African-American, 20% are Hispanic, 5% are Bi- or Multi-racial, and 5% will fall into a category of other ethnic groups (U.S. Department of Health and Human Services, 2008). As seen in Table 1, although the current sample's percentages of ethnic diversity were slightly different than the national sample, the current sample represented reasonable ethnic diversity across groups. Additionally, the current national estimate for gender of children in foster care is 53% male (U.S. Department of Health and Human Services), and the current sample matched this very closely.

Prior work also shows that foster homes often experience lower socioeconomic status (SES) than traditional homes. For example, statistics show that the median yearly income for foster homes is approximately $56,000, compared to approximately $74,000 for all households with children under 18 (O'Hare, 2008). The median income of the current sample was $50,000 yearly, which is quite similar to the median projected income of foster homes nationally. It was expected that the present sample would follow similar SES trends for foster homes found by O'Hare, such that 1% of foster homes would have a yearly income of 0; 15% would have a yearly household income of less than $20,000; 37% would have a yearly household income of $20,000-$49,999; 36% would have a yearly household income of $50,000-$99,999; and 11% would make $100,000 or more yearly. The household income of the current sample can be found in Table 1. This sample represented a similar distribution of income as those studied by O'Hare (2008). Overall, descriptive statistics show that this sample was similar to the national sample of children in foster care in terms of gender and income, but it may reflect some regional variance in ethnic diversity of children in care.

Measures

Optimism.

To assess children's positive expectations for their future, the Youth Life Orientation Test was used (YLOT; Ey et al., 2005, see Appendix A). The YLOT is a recently developed scale adapted from traditional measures used to study optimism in adults (the Life Orientation Test-Revised; Scheier, Carver, & Bridges, 1994). The YLOT is a 16-item self-report measure in which children indicate their level of agreement with statements about expectations for the future using a Likert-type scale. Items include statements such as "when things are bad, I expect them to get better" and "overall, I expect more good things to happen to me than bad things." The YLOT yields an optimism, a pessimism, and a total optimism score (optimism score plus reverse coded pessimism items). For the present study, the total optimism score was used to represent children's overall positive expectations for their future. Ey et al. found the YLOT to yield stable scores after one month (r = .70) and after seven months (r = .50 for total optimism score). They also found acceptable levels of internal consistency (alphas between .78-.83). The YLOT developers further found evidence for the measure's convergent validity with moderate, positive correlations occurring between YLOT total optimism scores and scores on measures of hope and self-efficacy (related but slightly different constructs). Additionally, Ey et al. found that the YLOT has predictive capabilities as well, as YLOT scores from their sample of 3rd through 6th grade students were predictive of their report of depression 3 months later (i.e., kids with higher initial optimism exhibited lower levels of depression later on). In the current sample, the reliability coefficient for this measure was .77, which falls into the acceptable range and is congruent with prior studies using the YLOT.

Positive family characteristics.

To assess the child's current family environment, foster parents' report on the Family Environment Scale (Moos & Moos, 1994) was used. The Family Environment Scale (FES) is a 90-item true-false measure that assesses various aspects of the current family environment. For the purposes of this study, a composite of the Relationship Dimensions scales was used (the Family Relationship Index (FRI)); this is an index score comprised of three subscales: Cohesion (support and help provided among family members); Expressiveness (degree to which emotions are openly discussed and expressed within the family); and Conflict (level of arguments and conflictual relationships within the family). Together, these three subscales provide information about the internal functioning of the family, specifically the general positivity and warmth in the home—factors implicated as characteristics that may influence children's optimism.

The Family Relationships Index was calculated by taking the sum of these three subscales, although some authors have used the average of the three scales. Each subscale has been reported to have acceptable internal consistency, with alphas ranging from .69-.78 (Moos & Moos, 1994). Additionally, the Family Relationships Index has been shown to yield higher alpha levels than the individual subscale scores (α = .89) (Holahan & Moos, 1983; Moos, 1990). The Family Relationships Index has been used successfully as a measure of family support in recent research (e.g., North, Holahan, Moos, & Cronkite, 2008). As support for using this index and the subscales comprising it in the prediction of optimism, prior studies of optimism have also found significant correlations between the Family Relationship subscales and optimism (Drory & Florian, 1998; Yu & Seligman, 2002).

The FES manual further details acceptable levels of test-retest reliability at two and four months for the three subscales in the Family Relationships Index (r = .66-.86), as well as

acceptable convergent and discriminant validity information for the measure as a whole. In the current sample, however, reliability coefficients for the three subscales that make up the Family Relationships Index were lower than is typically desired (FES Cohesion α = .41; FES Expressiveness α = .56; FES Conflict α = .33). However, these results are not necessarily surprising because the FES was originally designed for typical families. The current population of foster families represented a family environment that is inherently unique and a great diversion from the normal family experience as conceptualized within the FES measure. Furthermore, a number of the child participants came from the same home, possibly further suppressing the overall reliability coefficient values (i.e., less variability among responses). In general, the lower than typically desired reliability coefficients do not mean that scores for these families are invalid, but instead they reflect the uniqueness of the foster family environment.

Social support resources.

Children's perception of the support they receive from others was measured with the Social Support Scale for Children (Harter, 1985). The Social Support Scale for Children (SSSC) is a 24-item self-report measure in which children choose their level of agreement with statements about the level of support they receive from various sources (i.e., parents, teachers, friends, classmates). The SSSC yields four composite scores, one composite for each source. A total score of global support children perceive from all sources can be derived from these composites. This global score was used in the present study to represent the overall social support resources children have access to. This measure had good reliability with the present sample (α = .88).

Life events.

To measure children's stressful life events, the Life Events Checklist (Johnson & McCutcheon, 1980, see Appendix B) was used. The Life Events Checklist (LEC) is a self-report measure that has 46 potentially stressful events (i.e., getting glasses or braces, repeating a grade, changing schools, death of family member, etc.) listed as items. Children endorsed whether a particular event occurred, whether that particular event was positive or negative, and to what degree the event had a significant impact on his or her life (from none to a great deal). The LEC has been widely used in the study of stress in children since it conception (Johnson & Johnson, 2003). Brand and Johnson (1982) found that the LEC demonstrated acceptable test-retest reliability for both total counts of events endorsed and ratings of event impact. For this study, total number of life events endorsed was used to measure child participants' recent stressful experiences, as both positive and negative events can bring stress into children's lives. Cronbach's alpha for this measure in the present sample was .75, an acceptable level. However, it should be noted that this measure does not have any particular factor structure and serves merely as a checklist for the presence of stressful events.

Procedure

To obtain consent to conduct research with a vulnerable population such as children in foster care, permission was obtained at multiple levels. The county circuit court judges, who are the legal guardians of the children in foster care in the county, provided informed consent for this project. Additionally, managers of the local Children's Division of Social Services (the organization that coordinates placements in foster care for the county) were provided with information about the purpose and proposed procedures of the project. The Children's Division then consented to taking part in the project and provided mailing address information for

researchers to contact the foster parents of children in their care. Recruitment flyers providing information about the purpose, procedures and eligibility criteria for the project were mailed directly to the families on this list with pre-stamped reply envelopes through which foster parents indicated interest in the study to researchers. These recruitment flyers were also circulated through other Children's Division and affiliated organizations' newsletter mailing lists. Families were also recruited at foster parent in-service training meetings.

Families who were interested in participating in the project mailed completed recruitment forms to the researchers. A graduate student contacted these families and scheduled data collection in the home of the foster family. Before completing measures, foster parents completed a consent form and the child was read an assent form. Children completed measures separately from their foster parents. Research assistants read aloud measures and assisted children younger than 12 years old with completing forms. Children older than 12 were permitted to complete measures independently, although research assistants remained close by to answer questions and provide help if needed.

Throughout collection, because of the sensitive nature of asking maltreated children about their life experiences and psychological health, various practices were put into place to ensure that any potential distress that the children might experience was minimized. For example, caregivers were provided with mental health referrals post-collection. Research assistants also examined critical items that the youth reported on that indicated intent to harm themselves or others. After completing measures, caregivers received $60 compensation and youth received a toy or gift card worth $10.

Results

To determine the degree to which the variables of interest were related, bivariate correlations were computed. As seen in Table 2, several significant relations emerged. First, the YLOT Total Optimism score was moderately and negatively related to the total number of life events endorsed on the LEC, such that as the number of events reported increased, the reported level of optimism decreased (r = -.32, p < .05). Although this finding is consistent with the study predictions, the results failed to support the hypothesis that optimism and positive family environment, or optimism and social support would be positively correlated.

Table 2

Summary of Intercorrelations, Means, and Standard Deviations for YLOT, FES, SSSC, and LEC

Measure	1	2	3	4	M	SD
1. YLOT Total	—	.07	-.32*	.19	27.79	6.82
2. FES FRI		—	-.16	-.35*	155.57	12.45
3. LEC Total			—	.12	14.83	5.62
4. SSSC Total				—	76.04	12.35

Note: YLOT Total = Youth Life Orientation Test Total Optimism Score; FES FRI = Family Environment Scale Family Relationships Index; LEC Total = Life Events Checklist Total Events; SSSC Total = Social Support Scale for Children Total Support Score

*p < .05

To further explore relations among variables, bivariate correlations were calculated for the predictors. Positive family environment (FES FRI) was moderately and negatively associated with total perceived social support (SSSC Total) (r = -.35, p < .05). When subscales for the measures were included in correlational analyses, additional significant relations were found (see Table 3).

Table 3

Summary of Intercorrelations and Means for Additional YLOT, FES, SSSC, and LEC Subscales

Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	M
1. YLOT Total	—	.78**	-.88**	.07	.01	-.04	.13	-.32*	.19	.01	.12	.28	.03	27.79
2. YLOT Opt		—	-.41**	.05	.08	-.01	.00	-.28	.19	.00	.21	.18	.07	14.09
3. YLOT Pess			—	-.08	.06	.05	-.20	.29	-.12	-.01	.01	-.25	.00	9.62
4. FES FRI				—	.07	.70**	.55**	-.16	-.35*	-.37*	-.19	-.12	-.29	155.57
5. FES Cohesion					—	-.27	-.52**	.05	-.23	-.32*	.12	-.16	-.33*	55.80
6. FES Express						—	.15	-.15	-.35*	-.33*	-.34*	-.17	-.20	51.50
7. FES Conflict							—	-.11	.10	.14	-.01	.16	.12	48.26
8. LEC Total								—	.12	.14	.18	-.17	.33*	5.62
9. SSSC Total									—	.78**	.70**	.78**	.77**	76.04
10. SSSC Friend										—	.30*	.49*	.54**	19.54
11. SSSC Parent											—	.46**	.48**	18.78
12. SSSC Classmate												—	.45**	17.29
13. SSSC Teacher													—	20.42

Note: YLOT Total = Youth Life Orientation Test Total Optimism Score; YLOT Opt = Youth Life Orientation Test Optimism Subscale Score; YLOT Pess = Youth Life Orientation Test Pessimism Subscale Score; FES FRI = Family Environment Scale Family Relationships Index; FES Cohesion = Family Environment Scale Cohesion Subscale Score; FES Express = Family Environment Scale Expressiveness Subscale Score; FES Conflict = Family Environment Scale Conflict Subscale Score; LEC Total = Life Events Checklist Total Events; SSSC Total = Social Support Scale for Children Total Support Score; SSSC Friend = Social Support Scale for Children Friend Support Subscale Score; SSSC Parent = Social Support Scale for Children Parent Support Subscale Score; SSSC Classmate = Social Support Scale for Children Classmate Support Subscale Score; SSSC Teacher = Social Support Scale for Children Teacher Support Subscale Score.

**p < .01; *p < .05

Many of these correlations were to be expected because subscales and total scores on the same measures are by design expected to be significantly related (e.g., all SSSC subscales and

Total Score were significantly and positively related). However, the FES Cohesion subscale was not significantly related to the FES FRI score as was expected, while the other two subscales that comprise this index score were significantly and positively related to the FES FRI (FES Expressiveness, $r = .70$, $p < .01$; FES Conflict, $r = .55$, $p < .01$). Cohesion was significantly and negatively related to Conflict ($r = -.52$, $p < .01$).

Furthermore, FES Cohesion was significantly and negatively related to both perceived friend support (SSSC Friend, $r = -.32$, $p < .05$) and teacher support (SSSC Teacher, $r = -.33$, $p < .05$). Family Expressiveness (FES Expressiveness) was also significantly and negatively related to perceived support subscales (SSSC Friend, $r = -.35$, $p < .05$; SSSC Parent, $r = -.34$, $p < .05$). Additionally, the overall family support (FES FRI) was significantly and negatively related to perceived friend support (SSSC Friend) ($r = -.37$, $p < .05$). Finally, total life events (LEC Total) were significantly and positively associated with perceived teacher support (SSSC Teacher) ($r = .33$, $p < .05$).

Because initial analysis showed that two of the expected predictors (positive family environment and social support) were not significantly related to the criterion variable (optimism), they were not included as primary predictors in further analysis. In the next step of analysis, hierarchical regression was conducted to model the effect of life events on optimism. The child's Total Optimism score on the YLOT was used as the criterion variable in analyses, with the mean-centered total number of life events endorsed from the LEC used as the independent predictor variable. Regression results confirmed the correlational relation between these, as total life events significantly predicted optimism ($\beta = -.32$, $t(44) = -2.26$, $p < .05$) and accounted for a significant portion of the variance in optimism ($R^2 = .10$, $F(1, 44) = 5.09$, $p < .05$).

Discussion

The present study empirically examined theoretically suggested predictors of optimism in youth exposed to maltreatment and found that the number of life events experienced was a significantly predictor of optimism in this population. The experience of stressful life events, living in a positive family environment, and perceiving social support have been associated with adaptive child outcomes and have been suggested as factors that may play a role in children's perspectives on their futures. This study serves as an initial test of these factors' influence on optimism in children who have been exposed to maltreatment. As optimism has been consistently linked to positive outcomes for adults and children who experience stress in their lives, this study sought to better understand the factors that facilitate optimism, particularly in a vulnerable group, in an effort to better understand ways to help children recover from maltreatment and promote positive expectations for their futures.

The results of the current study add to the field's understanding of the origins of optimism in youth who have been exposed to the trauma of maltreatment. Correlational results show that life events and optimism were significantly related such that children who have experienced more life events were less optimistic about their futures. Additionally, as was expected, the number of stressful life events that these youth experienced significantly predicted their level of optimism and accounted for a significant portion of the variance in youth optimism. Although correlational, the results provide some empirical support for the theoretical notion (e.g., Seligman et al., 1995) that stressful experiences early in life may shape how children subsequently view their world.

However, contrary to hypotheses, a positive family environment and social support were not significantly related to optimism. This could have occurred for several reasons. First, the

family environment construct was not captured as reliably as expected. Second, it is possible that the familial influences on children's worldviews are moderated by their attachment to their caregivers. Indeed, Heinonen, Raikkonen, Keltikanga-Jarvinen, and Strandberg (2004) found that individuals with insecure attachments were less optimistic. Furthermore, a recent meta-analysis has shown that children who have been maltreated are much more likely to develop insecure or disorganized attachment styles than a secure attachment style (Cyr, Euser, Bakerman-Kranenburg, & Van Ijzendoorn, 2010). For children who have been placed in foster homes because of maltreatment, it may be more likely that they have insecure attachment styles, which may make it difficult for them to benefit from the influence of a positive family environment. Because this sample of children had experienced abusive relationships from their primary caregivers, they may have developed a view of others as unsafe or hurtful (Keil & Price, 2009). This insecure attachment and negative view of others may lead them to become disengaged from their family environments' influences, even in foster care, as a means of self-protection, as the notion of being cohesively bonded and attached to others may be related to past feelings and experiences of distress (Yama, Tovey, & Fovas, 1993). Future studies on the development of optimism would benefit from examining attachment history and current attachment to a foster family in children who have been exposed to maltreatment, perhaps by using attachment interviews and behavioral observations.

Although the present data do not support the influence of family factors on optimism, prior work has found that a positive, cohesive family environment, as well as the degree to which parents coach and model positive cognitions, can indeed play a role helping children cope with stressful experiences (Kliewer & Lewis, 1995). Additionally, the existing empirical support for familial influences on child optimism is quite mixed (Gillham et al., 2001b), suggesting that the

field has not yet discovered an adequate way to measure how family life affects children's views of their futures. It could be that familial influences are not easily quantified by one person's report of the environment because a family environment involves dynamic processes and multiple perspectives, with no single opinion likely being more correct or closer to reality. Indeed, a broader definition of family influence might include behaviors that the parents exhibit, as well as ways that children and parents think about their family. To best capture family environment, researchers may benefit from using multiple methods and reporters (including children) to better model this construct and help counteract shared method variance that comes with using only one method for data collection. Because theoretical perspectives suggest that caregivers can model and teach optimism to children, future work would also do well to examine both child and parent reports of optimism, or perhaps even parents' report of their children's optimism (e.g., Lemola, Raikkonen, Matthews, Scheier, Heinonen, Pesonen, et al., 2010), in addition to observations of parent-child interactions (as done in Mezulius, Hyde, & Abramson, 2006), as multiple methods of assessing familial influences on cognition will likely yield more precise understanding of exactly how caregivers can affect children's worldviews.

Moreover, there are some possible explanations for the nonsignificant result of social support as a predictor of optimism. This result is surprising in some ways because optimists choose more active, planful methods of coping (Scheier, Carver, & Bridges, 2001), such as seeking social support (Taylor & Stanton, 2001), which would require them to perceive that they have sources of social support that they can turn to. Although many studies have found a relation between optimism and social support (Brissette, Scheier, & Carver, 2002; Dougall, et al., 2001; Karademas, 2006), it is possible that in this population, social support is more complicated and affects one's expectations for the future less directly than in typical groups because previous

research shows that children with a history of maltreatment are prone to develop negative views of others and struggle to develop positive social relationships with others (Rogosch & Cicchetti, 1994), in addition to other negative outcomes (Cicchetti & Toth, 2005). Because this sample did report feeling social support that was not related to their expectations for their futures, it would seem that the relation between optimism and feeling supported by others is more complex in children with a history of maltreatment than what has been found in previous research with other populations.

Aside from relations between hypothesized predictors and optimism, positive family environment was significantly and negatively related to the youths' total perceived social support. This finding is in some ways counterintuitive, as one would assume that a supportive family would likely play a role in an individual's perception of support in general. This relation could reflect, however, the expected trajectory that occurs as children grow older, where family support may hold less influence on overall well-being than, for example, peer support (Cook, Buehler, & Henson, 2009), as intensity in conflict with caregivers increases (Laursen, Coy, & Collins, 1998). Moreover, because children with maltreatment history may have experienced negative family environments (i.e., with high levels of conflict and low levels of cohesion (Meyerson et al., 2002)), while they may feel comfortable with a foster family environment where conflict is likely less common compared to their family of origin, they may not perceive a lack of conflict as equating to a sense of support. For these children, positive family environment and the sense of support they perceive from their family and others may not necessarily be related.

Furthermore, the present study utilized foster parent reports of family environment and youth reports of their perceived social support. Previous work has consistently found

discrepancies in parent and child reports of their family environment (Jessop, 1981; Pelton & Forehand, 2001; Tein, Roosa, & Michaels, 1994), so it is possible that youth, particularly youth living in a foster family, perceive their family environment differently than how foster parents view the family environment. Although some work on foster family environments does exist (e.g., Orme & Buehler), future work would do well to explore and compare both foster parent and foster child perceptions of the family culture. Having insight into how both children in foster care and their caregivers perceive their family, especially where opinions diverge, could provide the field with a more clear perspective on what is a normative experience for foster families and may broaden the field's understanding of family functioning in a nontraditional setting. Understanding more about what children in foster care find helpful or harmful in their foster family, as well as knowing what foster families believe they are providing these children in terms of family environment, could help inform how to support the success of children placed in foster homes and how foster parents are trained to help these children cope with trauma.

Results also showed that positive family environment was negatively related to perceived friend support. In particular, family cohesion and family expressiveness were associated with friend support such that as familial cohesion and expressiveness increased, perceived friend support decreased. Family cohesion was also negatively associated with teacher support. These correlations again suggest that, within the present sample, perceptions of foster family support may be at odds with relationships with other potentially supportive people. It is as if being closer to one's foster family means that children are less likely to be close to others. These results could reflect the unique situation of foster care in that it is likely that the system as disrupts some of the typical social support resources available to children (Perry, 2006).

Interestingly, results further showed that as children experienced more life events, they also perceived higher levels of teacher support. This relation could reflect that, for children who have been maltreated and experience multiple life events, teachers represent a more stable source of support than what they might experience at home or with peers. Indeed, prior research suggests that teacher support can act a protective factor for youth who experience negative life events (Murberg & Bru, 2009). Even when foster placements change, the school the child attends often does not, making it likely that teachers may represent a stable adult for youth in custody. Perceiving support from a stable source such as a teacher, who is not a part of the child's abuse experience, may also influence a child to report more events, as prior work has found that people may disclose more negative information to others without similar experiences as opposed to those with similar experiences (Hoyt, Pasupathi, Smith, Yeater, Kay, & Tooley, 2010). Additionally, because these children likely have less than ideal attachment styles, they may feel more comfortable with teacher support than family support, as teachers may keep a greater emotional distance from children than caregivers typically do, providing the child with maltreatment history a greater sense of safety and trust.

Overall, these results provide an important first step in answering the call to understand more about how optimism develops in children (Chang, 2001). The significant prediction of optimism based on life events experienced suggests that Seligman's perspective about how early life event experience can frame a path for how children develop optimism is worthy of more study. In addition to supporting Seligman's hypothesis on life events' effect on optimism, the present results suggest that interventions for youth exposed to maltreatment may do well to address the range and impact of life events that these children experience. Because having more events was predictive of having lower optimism, youth exposed to maltreatment may benefit

from interventions that help them develop ways to cope with stressful events while maintaining positivity for their future, as finding ways to foster optimism may help lead them to resilience (Henry, 2001). Optimism interventions (Seligman et al., 1995; Martens, 2007) that are supplemented with ways to cope with life events may be effective in helping these children develop and maintain a positive outlook on their future (which may also facilitate the other positive benefits that optimism has been shown to provide when coping with stress (Brodhagen & Wise, 2008; Carver & Scheier, 2002).

Limitations

Although the present results suggest some important directions for the field, especially in regard to the role of life events, the findings are not without limitations. Namely, because the study was cross-sectional, the results cannot provide information on the long-term development of optimism in children. The present findings do suggest, however, that any investigation of optimism over time consider the child's life event experience as a possible moderator of optimism development. Also, the sample size, although adequate for the analyses, was rather small. In the field of child maltreatment, however, the present sample size is consistent what other researchers are often able to obtain (see Linares, Stovall-McClough, Li, Morin, Silva, Albert et al., 2008; Orme & Buehler, 2001). Using a sample that is closely protected and for whom multiple consents must be obtained creates necessary barriers to obtaining large samples in exchange for more consistency in participant maltreatment history. Moreover, the collection of data directly from youth exposed to maltreatment provides a cleaner method of investigation, compared to a larger sample of retrospective report from adults (as used in Brodhagen & Wise, 2008). Additionally, the reliability of the FES in this sample was less than expected. It is possible the low reliability of some FES scales may have limited the analyses. Although the FES authors

originally tested this measure with a diverse sample, other authors have also found problems with the measure's reliability (e.g., Roosa & Beals, 1990), particularly when using the FES with special populations (Rousey, Wild, & Blancher, 2002). Indeed, a particularly salient example can be found when Munet-Vilaró and Egan (1990) used the FES cross-culturally with foster families and also found low reliability coefficients (ranging from .29-.49) within their sample when using the three Family Relationship subscales that were also used in the present study. It is highly likely that a foster family represents a deviation from the families used to develop and normalize the FES; therefore, future work may yield a foster family-specific method of family environment assessment that takes into account the unique dynamics (i.e., multiple unrelated children living in one home, caregivers who previously have been unknown to the children, etc.) of a foster family. Finally, this study did not include a direct measure of parent optimism; future work might include parent-reported optimism to continue to define how parents can model and facilitate optimism development in children.

Future Directions and Implications for Policy and Practice

The results from the present study suggest that future studies should examine what types of life events are most influential in shaping children's expectations for their futures, as some life events may be more likely to affect children's expectations for their futures than others. For example, Seligman et al. (1995) suggested that it is possible that the death of a primary caregiver early on in life, as well as experiencing events that create chronic problems as opposed to time-limited stressors, may be more influential in optimism development than other events. Furthermore, because of some of the correlations in this sample between family environment and social support, it would also be beneficial to continue to study familial factors within foster families and work to discern how children exposed to maltreatment perceive support from their

caregivers and significant others, especially because social support has been shown to be particularly adaptive for children in foster care (Daining & DePanfilis, 2007). Understanding how familial and social support processes operate for children exposed to maltreatment may help interventionists and policy makers craft effective services for children in foster care to help assist them in developing important coping tools. Additionally, a longitudinal examination of factors predicting optimism will provide stronger evidence of causal influences.

With respect to policy and practice in working with children exposed to maltreatment, the results suggest that it would be worthwhile for therapists and caseworkers to assess the life events of children in foster care outside of their maltreatment experience, as clearly other stressors may put them at-risk for failure to develop hope for the future. It is also important for clinicians to work with foster children on helping them form positive ways of thinking about their future to facilitate more adaptive coping with their maltreatment. Chipungu and Bent-Goodley (2004) highlighted the fact that there are many current systemic flaws in the agencies that manage child abuse interventions; because of these systems-level problems, working with these children on an individual level to promote optimism for their futures may be one of the most promising ways to set them on a path towards positive outcomes.

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Appendix A

Youth Life Orientation Test Measure

Instructions

Y-LOT Children: Revised Oct.1.97

Please answer the following questions about yourself by putting how true or not true each statement is for you. Please **COLOR IN** the oval that seems to describe you the best. There are no right or wrong answers. Just describe yourself as best as you can.

1. It's easy for me to have fun.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

2. I like to be active.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

3. I'm always hopeful about my future.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

4. Things usually go wrong for me.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

5. When I am not sure what will happen next, I usually expect it to be something good.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

6. Usually, I don't expect things to go my way.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

7. Usually, I don't expect good things to happen to me.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

8. I am a lucky person.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

9. If something nice happens, chances are it won't be to me.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

10. Each day I look forward to having a lot of fun.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

11. When things are good, I expect something to go wrong.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

12. I usually expect to have a good day.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

13. No matter what I try, I do not believe anything is going to work.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

14. Overall, I expect more good things to happen to me than bad things.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

15. Each day I expect bad things to happen.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

16. When things are bad, I expect them to get better.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

17. Even when people around me are sick, I expect to be healthy.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

18. If some illness is going around, I am sure to get it.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

19. When I do not feel well, I expect that I will feel better soon.

3	2	1	0
true for me	sort of true for me	sort of not true for me	not true for me

Appendix B

Life Events Checklist Measure

ID # : _____

Life Events Checklist

Date: _____

Please read to child: I am going to read a list of things that sometimes happen to people and I want you to tell me if any of these things have happened to you. I will circle the number of the event that you have experienced and then I will ask you to try to remember when it happened. I will also ask you to rate the event as a *Good* event or a *Bad* event. Finally, I will ask you to tell me how *Good* or how *Bad* the event was. I will circle the number that tells how good or how bad the event was for you.

0 = None (not good or bad at all) | **1 = Little** (a little bit good or bad) | **2 = Medium** (pretty good or pretty bad) | **3 = Big** (really good or bad)

(circle #)	(date mo/yr)	(circle one)			(# times)
1. Have you moved to a new home?	_____	Good	Bad	0 1 2 3	_____
2. Do you have a new brother or sister?	_____	Good	Bad	0 1 2 3	_____
3. Have you changed to a new school?	_____	Good	Bad	0 1 2 3	_____
4. Has any family member been seriously ill or injured?	_____	Good	Bad	0 1 2 3	_____
5. Have your parents gotten divorced ?	_____	Good	Bad	0 1 2 3	_____
6. Have your parents been arguing more?	_____	Good	Bad	0 1 2 3	_____
7. Has your mother or father lost his/her job?	_____	Good	Bad	0 1 2 3	_____
8. Has a family member died?	_____	Good	Bad	0 1 2 3	_____
9. Have your parents separated?	_____	Good	Bad	0 1 2 3	_____
10. Has a close friend died?	_____	Good	Bad	0 1 2 3	_____
11. Has either parent been away from home more?	_____	Good	Bad	0 1 2 3	_____
12. Has a brother or sister left home?	_____	Good	Bad	0 1 2 3	_____
13. Has a close friend been seriously ill or injured?	_____	Good	Bad	0 1 2 3	_____
14. Has one of your parents gotten into trouble with the law?	_____	Good	Bad	0 1 2 3	_____
15. Has one of your parents gotten a new job?	_____	Good	Bad	0 1 2 3	_____
16. Do you have a new stepmother or stepfather?	_____	Good	Bad	0 1 2 3	_____
17. Has one of your parents gone to jail?	_____	Good	Bad	0 1 2 3	_____
18. Has there been a change in how much money your parents have?	_____	Good	Bad	0 1 2 3	_____
19. Have you had trouble with a brother or sister?	_____	Good	Bad	0 1 2 3	_____
20. Have you gotten any awards for good grades?	_____	Good	Bad	0 1 2 3	_____
21. Have you joined a new club?	_____	Good	Bad	0 1 2 3	_____
22. Have you lost a close friend ?	_____	Good	Bad	0 1 2 3	_____
23. Have you been arguing less with your parents?	_____	Good	Bad	0 1 2 3	_____
24. Have you been in special education classes? (resource room, class for kids with learning or behavior problems)	_____	Good	Bad	0 1 2 3	_____
25. Have you had a problem obeying rules?	_____	Good	Bad	0 1 2 3	_____

0 = None (not good or bad at all)	1 = Little (a little bit good or bad)	2 = Medium (pretty good or pretty bad)	3 = Big (really good or bad)

(circle #)		(date mo/yr)	(circle one)		(# times)				
26.	Have you gotten new glasses or braces?	_____	Good	Bad	0	1	2	3	_____
27.	Have you had learning problems in school?	_____	Good	Bad	0	1	2	3	_____
28.	Have you had a new boyfriend/girlfriend?	_____	Good	Bad	0	1	2	3	_____
29.	Have you repeated a grade in school?	_____	Good	Bad	0	1	2	3	_____
30.	Have you been arguing more with your parents?	_____	Good	Bad	0	1	2	3	_____
31.	Do you have any difficulty saying words, or do other people have a hard time understanding what you say?	_____	Good	Bad	0	1	2	3	_____
32.	Have you gotten into trouble with the police?	_____	Good	Bad	0	1	2	3	_____
33.	Have you been seriously ill or injured?	_____	Good	Bad	0	1	2	3	_____
34.	Have you broken up with a boyfriend/girlfriend?	_____	Good	Bad	0	1	2	3	_____
35.	Have you made up with a boyfriend/girlfriend?	_____	Good	Bad	0	1	2	3	_____
36.	Have you had trouble with a teacher?	_____	Good	Bad	0	1	2	3	_____
37.	Have you been put in a foster home?	_____	Good	Bad	0	1	2	3	_____
38.	Do you have a hearing problem?	_____	Good	Bad	0	1	2	3	_____
39.	Have you tried out for a sport but didn't make it?	_____	Good	Bad	0	1	2	3	_____
40.	Have you been suspended from school?	_____	Good	Bad	0	1	2	3	_____
41.	Have you made failing grades on your report card?	_____	Good	Bad	0	1	2	3	_____
42.	Have you tried out for a sports team and made it?	_____	Good	Bad	0	1	2	3	_____
43.	Have you had any trouble with classmates?	_____	Good	Bad	0	1	2	3	_____
44.	Have you gotten any awards for playing sports?	_____	Good	Bad	0	1	2	3	_____
45.	Have you been put in jail?	_____	Good	Bad	0	1	2	3	_____
46.	Are there any other events that we haven't talked about?								
	_____	_____	Good	Bad	0	1	2	3	_____
48.	Are there any other events that we haven't talked about?								
	_____	_____	Good	Bad	0	1	2	3	_____

Total # Negative Events	
Total Negative Impact	

Total # Positive Events	
Total Positive Impact	

Appendix C

Demographics Form

DEMOGRAPHIC QUESTIONNAIRE

Child's Date of Birth: _____ Child's Age: ____ Grade in School: ___ Child's Race: _____

Child's Gender: Male Female What is your relationship to the child? _____

What adults now live in the child's home?
_____

Your marital status (circle one): married divorced/separated widowed remarried never married

Highest level of education completed by child's mother: _____ father: _____

How many brothers and sisters does your child have? _____

Please list the following information for each sibling:

First Name Age Gender Natural or Step Living in the home (Y or N)

_____
_____
_____
_____
_____

How many schools has your child attended? _____

Schools Attended: **Reason for move:**
_____
_____
_____

What special activities does your child participate in? (i.e. sports, scouts, music lessons, etc.)
Activities involved in:
_____
_____
_____

Does your child have any major health problems? Yes No (If so, what are they?)

Any significant injuries or surgeries? _____

How often has your child seen the doctor in the last year? _____

The school nurse last year? _____

Do you or your spouse have any chronic medical problems? If so, what are they?

_____
_____
_____

Have you, your child, or any one else in your family been treated for emotional or psychological problems? Yes No

Person's relationship to child	Type of problem	Treat. Type (therapy, hospital, etc.)	Dates

All children experience stress. What stresses has your child experienced in the last year? How old was he/she at the time?

Incident:	**Age of Child:**

Taking into account all sources of income (wages, interest, government assistance, child support, etc.), please estimate the total family income on a yearly basis before taxes.

$_____

Who is the primary wage earner in the family? (Check one)

____father ____mother ____both equally

Answer the following for the primary wage earner (use father if both are primary).

Kind of work (e.g., electrical engineer, stock clerk, farmer)

_____
_____

Most important activities (e.g., filing, supervision, kept books, taught)

_____
_____
_____

Kind of business (e.g., shoe store, farm, auto dealership)

_____
_____